

APPLICATION FOR CERTIFICATE OF FINANCIAL RESPONSIBILITY

<p>COMMONWEALTH OF VIRGINIA</p> <p>DEPARTMENT OF ENVIRONMENTAL QUALITY</p> <p>APPLICATION FOR VESSEL CERTIFICATE OF FINANCIAL RESPONSIBILITY</p>	<p>GENERAL (PART I OF 4 PARTS)</p> <p>Initial certificate [] [check appropriate box] Renewal certificate []</p>
<p>1. (a) Legal name of applicant</p>	<p>INSTRUCTIONS</p> <p>Please type or print and submit this application to Director, Waste Program Coordination, Department of Environmental Quality, P. O. Box 10009, Richmond, Virginia 23240-0009. The application is in four parts: Part I - General; Part II - Evidence of Financial Responsibility; Part III - Declaration; Part IV - Concurrence of Agent. Applicants must answer all applicable questions. If a question does not apply, answer Anot applicable. \neq Incomplete applications will be returned. If additional space is required, supplemental sheets may be attached. All information must be provided in the English language.</p>
<p>(b) Trade name (if any)</p>	
<p>3. State applicant's legal form of organization, i.e., whether operating as an individual corporation, partnership, association, joint stock company, business trust or other organized group of persons (whether incorporated or not) or as a receiver, trustee, or other liquidating agent and briefly describe current business activities and length of time engaged therein.</p>	
<p>(a) If a corporation, association, or other organization, indicate:</p>	
<p>State in the United States, or foreign country, in which incorporated or organized</p>	<p>Date of incorporation or organization</p>
<p>(b) If a partnership, provide name and address of each partner:</p>	
<p>4. Name and address of applicant's registered agent in Virginia.</p>	

EVIDENCE OF FINANCIAL RESPONSIBILITY (PART II OF 4 PARTS)

5. List all applicant's vessels which require Certificates of Financial Responsibility under 9 VAC 20-170-10 et seq. In column (d) indicate the number A1" if the applicant is both the owner and operator of the vessel. Indicate A2" in column (d) if the applicant is not both the owner and operator.

NAME OF VESSEL (a)	COUNTRY OF REGISTRY (b)	GROSS TONS (c)	A1" or A2" (d)

5(e) If applicant is the vessel operator and indicated A2" for any vessel listed above in column 5(d), indicate the following for the vessel owner; If applicant is the vessel owner as defined in 9 VAC 20-170-10 et seq. and A2" for any vessel listed above in column 5(d), indicate the following for the vessel operator:

NAME OF VESSEL	OWNER OR OPERATOR	MAILING ADDRESS

PART II (CONTINUED)

6. Items 7 through 12 are methods of establishing financial responsibility. Check the appropriate box and answer only the items which are applicable to this application.

<input type="checkbox"/> Trust Agreement [Answer Items 7 & 8]	<input type="checkbox"/> Surety Bond [Answer Items 9 & 10]	<input type="checkbox"/> Letter of Credit [Answer Items 11 & 12]
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7. Name and address of applicant=s trustee (a signed, original trust agreement in the form of Appendix I must be filed with the Department before a Certificate will be issued):

8. Total fund balance: \$

9. Name and address of applicant=s surety (a signed, original surety bond in the form of Appendix II must be filed with the Department before a Certificate will be issued):

10: Total amount of surety bond: \$

11. Name and address of the issuer of the applicant=s letter of credit (a signed, original letter of credit in the form of Appendix III must be filed with the Department before a Certificate will be issued):

12. Total amount of letter of credit: \$

13. Items 7 through 12 are methods of establishing proof of liability coverage. Check the appropriate box and answer only the items which are applicable to this application.

<input type="checkbox"/> Insurance Policy [Answer Items 14 & 15]	<input type="checkbox"/> Trust Agreement [Answer Items 16 & 17]	<input type="checkbox"/> Surety Bond [Answer Items 18 & 19]	<input type="checkbox"/> Letter of Credit [Answer Items 20 & 21]
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14. Name and address of applicant=s insurer (a signed, original endorsement of insurance in the form of Appendix IV or a signed, original certificate of insurance in the form of Appendix V and a copy of the insurance policy must be filed with the Department before a Certificate will be issued):

15. Total applicable policy limits:

16. Name and address of applicant=s trustee (a signed, original trust agreement in the form of Appendix VI must be filed with the Department before a Certificate will be issued):

PART II (CONTINUED)

17. Total fund balance: \$

18. Name and address of applicant=s surety (a signed, original surety bond in the form of Appendix VII must be filed with the Department before a Certificate will be issued):

19. Total amount of surety bond: \$

20. Name and address of the issuer of the applicant=s letter of credit (a signed, original letter of credit in the form of Appendix VIII must be filed with the Department before a Certificate will be issued):

21. Total amount of letter of credit: \$

DECLARATION (PART III OF 4 PARTS)

22. Applicant=s mailing address (street, post office box, city, state or country, zip code.

24. Type or print in this space the name and title of the official who is signing this application:

25. Address of principal office in the United States:

23. Telefax number:

26. Telephone number (area code and number):

I declare that I have examined this application, including any accompanying schedules and statements, and, to the best of my knowledge and belief, it is true, correct, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

I agree that in the event the agent designated in Item 4 of Part I above, or that agent's replacement as may be designated later with the approval of the Director, Department of Environmental Quality, cannot be served due to death, disability, unavailability, or similar event, the Director, Department of Environmental Quality, is considered the agent for service of process. I have signed this application in my capacity as an authorized official of the applicant, or, if acting under a power of attorney, pursuant to the power vested in me by the applicant as evidenced by the attached power of attorney.

DATE

SIGNATURE OF AUTHORIZED OFFICIAL

CONCURRENCE OF AGENT (PART IV OF 4 PARTS)

PART IV - A must be completed by the person designated in Item 4 of Part I to serve as applicant's Virginia agent for service of process. PART IV - B must be completed by the applicant. Part IV also need not be completed if the applicant is a Virginia entity and has appointed itself as agent in Item 4 of Part I.

PART IV - A

It is hereby agreed that

shall serve as the applicant's Virginia agent for service of process for purposes of 9 VAC 20-170-10 et seq. This designation and agreement shall cease immediately in the event the applicant designates a new agent acceptable to the Director of the Department of Environmental Quality.

Date:

Signature of Agent:

Title:

Business Address:

PART IV - B

Name of applicant (from Item 1(a):

Signature of authorized official signing on behalf of applicant:

[NOTE: The application must be accompanied by a written statement providing authority to sign, where the signer is not disclosed as an individual applicant, a partner in a partnership applicant, or a director or any other duly authorize officer of a corporate applicant.] *(Person signing here should also sign in appropriate place on Part III)*

Date:

Type or Print Name and Title:

END OF APPLICATION